

Exhibition 4

Date 2-3-09

Bill No. _____



Taxation of Commercial Property in Montana

January 27, 2009

Taxation of Commercial Property in Montana

"The state shall appraise, assess, and equalize the valuation of all property which is to be taxed in the manner provided by law." Art. VIII, Sec. 3, Mont. Constitution "All property in this state is subject to taxation, except as provided otherwise." Section 15-6-101(1), MCA.

In order to ensure that all property subject to taxation within the state is appraised, assessed, and equalized as required by Art. VIII, Sec. 3 of the Montana Constitution, the Legislature has developed a comprehensive classification and valuation system. The portion of that system relating to classification is codified in Title 15, Chapter 6, Part 1, of the Montana Code Annotated. Montana's classification system currently contains 14 distinct classes into which all taxable properties are grouped according to the property's characteristics and use. Both residential and commercial property is included as part of class four, codified at 15-6-134, MCA. The portions of the system relating to appraisal and assessment are codified in Title 15, Chapters 7 and 8, MCA.

Based upon its understanding that similar properties must be similarly treated for tax purposes, the Legislature established the following requirements for the classification and valuation of Commercial property:

General and uniform methods

- The Department of Revenue must establish general and uniform methods for classifying:
 - Land; city and town lots; and rural and urban improvements 15-7-103(1)
- The methods used by the Department must be adopted by rule pursuant to the Montana Administrative Procedures Act (MAPA) set out in 2-4-101, et seq.

Classification

- Unless included in another class or exempted by law, Class four commercial property includes:
 - Commercial land 15-6-134(1)(a)
 - Vacant or occupied 15-6-134(1)(g)(i)&(ii)
 - Buildings 15-6-134(1)(g)(i)

Periodic Revaluation

- The Department must administer and supervise a program for the periodic revaluation of commercial property 15-7-111; 42.18.107, ARM

- Under current law this periodic revaluation must occur every six years 15-7-111(3)
 - The 2009 commercial reappraisal plan has been adopted at 42.18.113, ARM *Available on Sec 22 of the website*

Valuation Methods

- "All taxable property must be assessed at 100% of its market value except as otherwise provided." 15-8-111(1)
- "Market value is the value at which property would change hands between a willing buyer and a willing sell, neither being under any compulsion to buy or to sell and both having reasonable knowledge of relevant facts." 15-8-111(2)

Land

- The market value of commercial lots is generally estimated using Computer Assisted Land Pricing (CALP) 42.18.110(3), ARM
 - CALP uses comparable sales approach to value land
 - Sales data is obtained from Realty Transfer Certificates (RTCs) 15-7-301, et seq.

Improvements

- The market value of commercial improvements is generally estimated using the Department's computerized Property Valuation Assessment System (PVAS) 42.18.110, ARM
 - Commercial improvements: the preferred method for valuing commercial improvements is the income approach 42.18.107, ARM
 - $V = I/R$ Value = income/rate 42.20.108, ARM
 - If the Department is unable to develop an income model with a valid capitalization rate, then the cost approach or comparable sales approach will be used 42.18.107, ARM
 - Cost data is generally obtained from commercially generated cost tables that are indexed to reflect local construction material and labor costs
 - Comparable sales data is obtained from RTCs 15-7-301, et seq.

Reductions to Commercial Market Values

- Comstead Exemption 15-6-222
 - Applies to commercial improvements
 - For tax year 2008 and succeeding tax years, 15% of the market value of commercial property is exempt

Tax Rate

- Beginning in tax year 2008, unless otherwise provided, commercial property is taxed at 3.01% of its taxable market value. 15-6-134(2)(a)(iv)

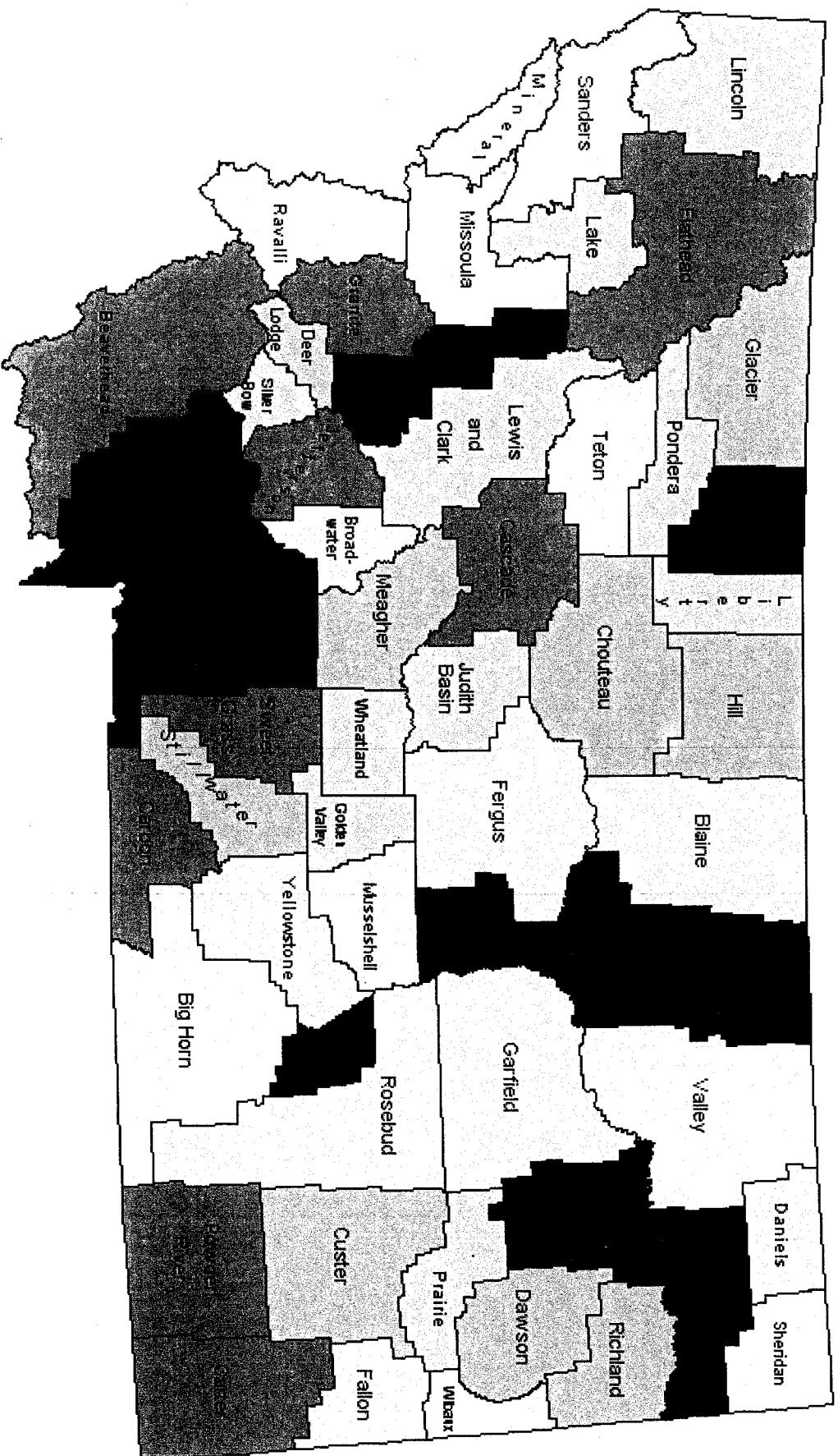
Assessment

- "The Department of Revenue shall have full charge of assessing all property subject to taxation and equalizing values and shall secure such personnel as is necessary to properly perform its duties." 15-8-101
- The Department must assess commercial property by the first Monday in August each year 15-8-201(1)
 - Assessment notices generally issued in June
- The Department must assess commercial property to the person by whom it was owned or claimed or in whose possession or control it was in as of the preceding January 1 15-8-201(2)(a)
 - The Department may issue revised assessments under certain circumstances 15-8-601
 - Escaped assessment
 - Been erroneously assessed
 - Been omitted from taxation
 - Within 10 years
 - Original ownership, possession, or control
 - Must provide notice of revised assessment within 10 days 15-8-601(3)(a)
 - 30 day opportunity for assessment revision review 15-8-601(3)(a)
 - 30 day opportunity to appeal revised assessment to local County Tax Appeal Board (CTAB) 15-8-601(3)(c)

Appeals

- If the owner of any land or improvements is dissatisfied with the Department's market value appraisal or classification, the owner may request an informal assessment review 15-7-102(3)
 - Request must be made in writing
 - Must be submitted within 30 days of receipt of assessment notice
 - Department must issue its determination in writing
- If the property owner feels aggrieved by the classification or appraisal after the informal review, the property owner may appeal to the CTAB in the county in which the property is located 15-7-102(6)
 - Appeal must be in writing
 - Must be submitted within 30 days after Department mails notice of determination of informal review
 - Taxpayer or representative must appear
- If, following appeal to the CTAB, a taxpayer is dissatisfied with the result, the taxpayer may appeal the CTAB's decision to the State Tax Appeal Board 15-15-104
 - Appeals from a CTAB to STAB are governed by 15-2-301
- Petition for Judicial Review of a STAB decision may be taken to District Court
 - Must be filed within 60 days
 - In Lewis & Clark County or the county in which the property is located
 - Judicial review conducted pursuant to 2-4-701 et seq.,
 - On the record
- District court decisions may be appealed to Montana Supreme Court 2-4-711
 - Must be filed within 60 days

Change by County Class 4 Commercial



Percent Change in Commercial Property

6.80% - 20.39%
37.19% - 42.68%

22.48% - 29.04%
42.79% - 49.85%

29.12% - 37.07%
50.45% - 67.27%

% Change in Value By County with DOR Region For the Last 3 Reappraisal Cycles

County	Region	Reappraisal TY1997 Class 4 Commercial % Increase Total	Reappraisal TY1997 Class 4 Commercial % Increase Annualized	Reappraisal TY2003 Class 4 Commercial % Increase Total	Reappraisal TY2003 Class 4 Commercial % Increase Annualized	Reappraisal TY2009 Class 4 Commercial % Increase Total	Reappraisal TY2009 Class 4 Commercial % Increase Annualized
Beaverhead	5	47%	10.11%	10%	1.58%	47%	6.69%
Big Horn	6	8%	1.91%	1%	0.22%	19%	2.99%
Blaine	2	4%	0.99%	22%	3.42%	22%	3.44%
Broadwater	5	12%	2.87%	5%	0.82%	25%	3.82%
Carbon	6	46%	9.92%	25%	3.81%	46%	6.49%
Carter	6	12%	2.87%	-3%	-0.45%	43%	6.12%
Cascade	2	24%	5.53%	21%	3.20%	47%	6.62%
Chouteau	2	2%	0.50%	12%	1.85%	43%	6.09%
Custer	6	1%	0.25%	15%	2.43%	40%	5.82%
Daniels	3	7%	1.71%	20%	3.08%	29%	4.34%
Dawson	3	1%	0.25%	9%	1.40%	40%	5.71%
Deer Lodge	5	0%	0.00%	28%	4.15%	37%	5.41%
Fallon	6	5%	1.23%	-1%	-0.17%	29%	4.32%
Fergus	2	12%	2.87%	13%	2.02%	25%	3.76%
Flathead	1	12%	2.87%	25%	3.80%	49%	6.89%
Gallatin	5	53%	11.22%	26%	3.99%	60%	8.11%
Garfield	3	0%	0.00%	2%	0.25%	25%	3.78%
Glacier	2	4%	0.99%	6%	1.02%	43%	6.10%
Golden Valley	6	10%	2.41%	5%	0.80%	36%	5.25%
Granite	4	50%	10.67%	18%	2.74%	46%	6.56%
Hill	2	10%	2.41%	6%	1.01%	41%	5.87%
Jefferson	5	24%	5.53%	4%	0.61%	45%	6.42%
Judith Basin	2	5%	1.23%	8%	1.24%	29%	4.39%
Lake	1	31%	6.98%	12%	1.97%	32%	4.70%
Lewis And Clark	4	40%	8.78%	16%	2.44%	35%	5.17%
Liberty	2	0%	0.00%	7%	1.14%	35%	5.10%
Lincoln	1	32%	7.19%	11%	1.74%	29%	4.35%
Madison	5	36%	7.99%	14%	2.14%	67%	8.95%
McCone	3	0%	0.00%	4%	0.64%	58%	7.90%
Meagher	5	26%	5.95%	-5%	-0.81%	41%	5.84%
Mineral	4	49%	10.48%	16%	2.50%	27%	4.03%
Missoula	4	28%	6.37%	19%	2.92%	17%	2.62%
Musselshell	6	-7%	-1.80%	9%	1.42%	14%	2.27%
Park	5	25%	5.80%	12%	1.96%	50%	7.04%
Petroleum	3	-15%	-3.98%	-1%	-0.18%	51%	7.16%
Phillips	3	3%	0.74%	11%	1.75%	53%	7.36%
Pondera	2	6%	1.47%	9%	1.45%	32%	4.72%
Powder River	6	7%	1.71%	4%	0.69%	50%	6.97%
Powell	4	35%	7.79%	25%	3.74%	59%	8.07%
Prairie	3	-2%	-0.50%	-1%	-0.24%	31%	4.59%
Ravalli	4	26%	5.95%	12%	1.90%	8%	1.28%
Richland	3	17%	4.00%	13%	2.00%	41%	5.94%
Roosevelt	3	7%	1.71%	10%	1.64%	55%	7.62%
Rosebud	6	-9%	-2.33%	7%	1.15%	23%	3.45%
Sanders	1	39%	8.58%	13%	2.00%	12%	1.91%
Sheridan	3	1%	0.25%	-1%	-0.15%	20%	3.14%
Silver Bow	5	24%	5.53%	4%	0.58%	29%	4.40%
Stillwater	6	16%	3.78%	14%	2.21%	40%	5.72%
Sweet Grass	6	15%	3.56%	21%	3.23%	50%	6.95%
Teton	2	4%	0.99%	10%	1.66%	19%	2.89%
Toole	2	5%	1.23%	2%	0.26%	57%	7.82%
Treasure	6	-17%	-4.55%	-3%	-0.54%	54%	7.43%
Valley	3	7%	1.71%	1%	0.22%	7%	1.10%
Wheatland	6	3%	0.74%	6%	1.05%	37%	5.40%
Wibaux	3	0%	0.00%	1%	0.14%	15%	2.33%
Yellowstone	6	19%	4.44%	23%	3.50%	24%	3.58%
Statewide		24%	5.53%	18%	2.87%	34%	5.01%

Reappraisal Analysis of Commercial Properties That Increased, Decreased or Had No Change - Without Mitigation
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Commercial Properties	Number of Properties	Before Reappraisal	After Reappraisal	Change	Percent Change
<u>Increase in Value</u>	25,338				
Average Reappraisal Value		320,379	470,414	150,035	47%
Average Taxable Value		8,197	12,036	3,839	47%
<u>Decrease in Value</u>	5,420				
Average Reappraisal Value		342,277	266,954	(75,323)	-22%
Average Taxable Value		8,757	6,830	(1,927)	-22%
<u>No Change in Value</u>	18				
Average Reappraisal Value		47,739	47,739	0	0%
Average Taxable Value		1,221	1,221	0	0%
<u>Combined Change</u>	30,776				
Average Reappraisal Value		324,076	434,335	110,259	34%
Average Taxable Value		8,291	11,112	2,821	34%

Statewide

Dollar Change in Value - Reappraisal Fully Phased In - No Mitigation

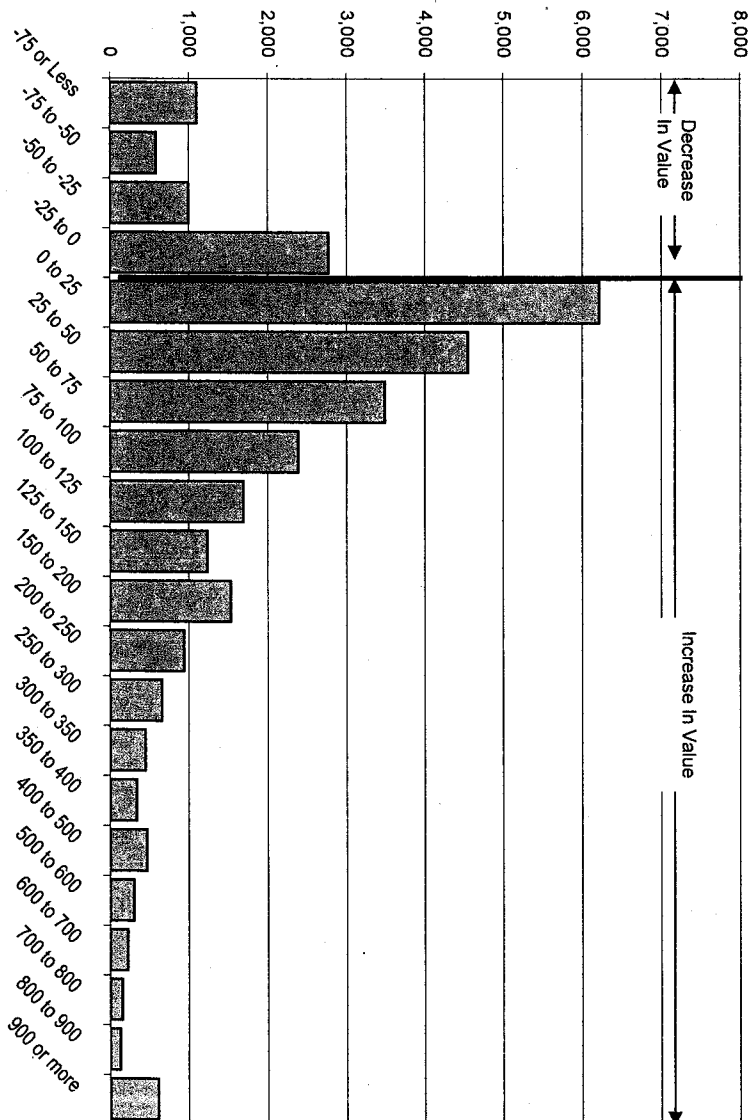
Distribution of The Change In Value of a Business

Change in Value	In Ratio			
	Number	Percent	Number	Percent
Greater Than -\$75,000	1,098	3.6%	1,098	3.6%
-\$75,000 to -\$50,000	580	1.9%	1,678	5.5%
-\$50,000 to -\$25,000	992	3.2%	2,670	8.7%
-\$25,000 to \$0	2,768	9.0%	5,438	17.7%
\$0 to \$25,000	6,207	20.2%	11,645	37.8%
\$25,000 to \$50,000	4,546	14.8%	16,191	52.6%
\$50,000 to \$75,000	3,491	11.3%	19,682	64.0%
\$75,000 to \$100,000	2,385	7.7%	22,067	71.7%
\$100,000 to \$125,000	1,690	5.5%	23,757	77.2%
\$125,000 to \$150,000	1,231	4.0%	24,988	81.2%
\$150,000 to \$200,000	1,529	5.0%	26,517	86.2%
\$200,000 to \$250,000	934	3.0%	27,451	89.2%
\$250,000 to \$300,000	657	2.1%	28,108	91.3%
\$300,000 to \$350,000	447	1.5%	28,555	92.8%
\$350,000 to \$400,000	335	1.1%	28,890	93.9%
\$400,000 to \$500,000	469	1.5%	29,359	95.4%
\$500,000 to \$600,000	300	1.0%	29,659	96.4%
\$600,000 to \$700,000	222	0.7%	29,881	97.1%
\$700,000 to \$800,000	155	0.5%	30,036	97.6%
\$800,000 to \$900,000	129	0.4%	30,165	98.0%
Greater Than \$900,000	611	2.0%	30,776	100.0%

Change in Value Summary

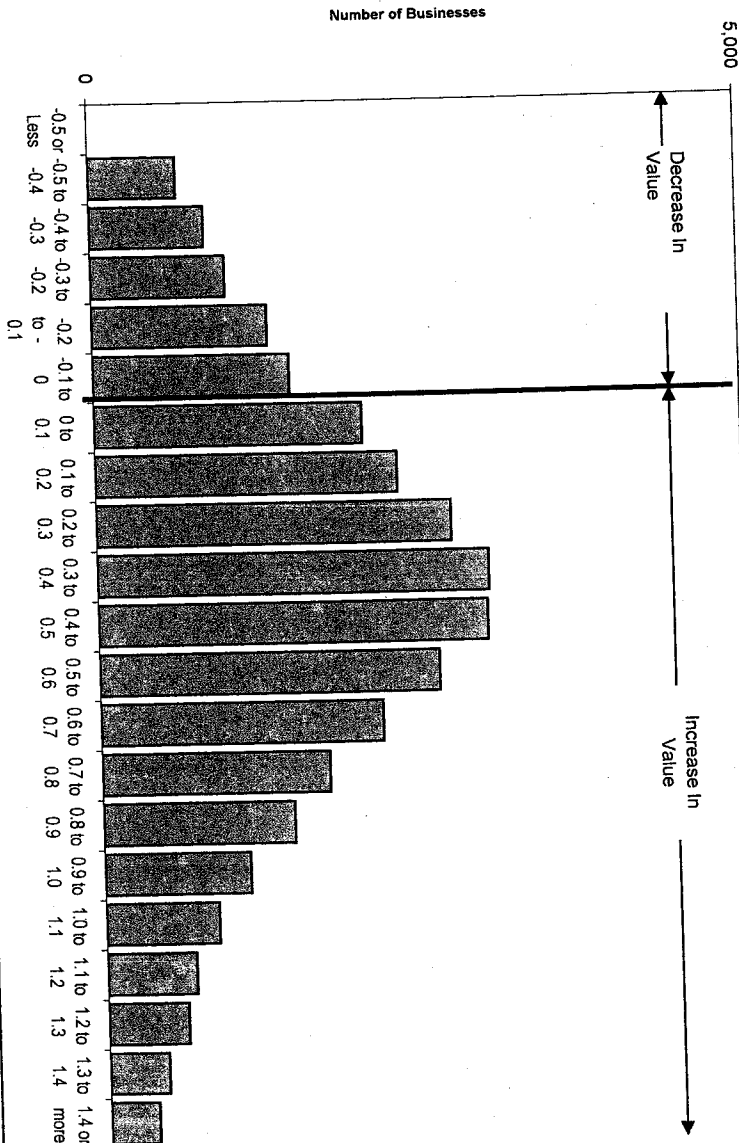
17.7% Decrease in Value, 82.3% Increase in Value, 71.7% have a \$100k or less Change in Value

Change in a Business's Value Due to Reappraisal - (TY2014)



% Change in Market Value - Reappraisal Fully Phased In - No Mitigation

Commercial % Change in Market Value Due to Reappraisal				
% Change in Value	In Bracket			
	Number	Percent	Number	Percent
Greater Than -50%	0	0.0%	0	0.0%
-50% to -40%	670	2.2%	670	2.2%
-40% to -30%	877	2.8%	1,547	5.0%
-30% to -20%	1,033	3.4%	2,580	8.4%
-20% to -10%	1,347	4.4%	3,927	12.8%
-10% to 0	1,511	4.9%	5,438	17.7%
0 to 10%	2,067	6.7%	7,505	24.4%
10% to 20%	2,332	7.6%	9,837	32.0%
20% to 30%	2,740	8.9%	12,577	40.9%
30% to 40%	3,025	9.8%	15,602	50.7%
40% to 50%	3,012	9.8%	18,614	60.5%
50% to 60%	2,628	8.5%	21,242	69.0%
60% to 70%	2,180	7.1%	23,422	76.1%
70% to 80%	1,755	5.7%	25,177	81.8%
80% to 90%	1,474	4.8%	26,651	86.6%
90% to 100%	1,123	3.6%	27,774	90.2%
100% to 110%	869	2.8%	28,643	93.1%
110% to 120%	688	2.2%	29,331	95.3%
120% to 130%	616	2.0%	29,947	97.3%
130% to 140%	457	1.5%	30,404	98.8%
Greater Than 140%	372	1.2%	30,776	100.0%
% Change in Value Summary				
17.7% Decrease in Value, 82.3% Increase in Value, 50.7% have a 40% or less Change in Value				



% Change in a Business's Value Due to Reappraisal - (TY2014)

Dollar Change in Market Value

Average Residential Property

Average Change in Market Value



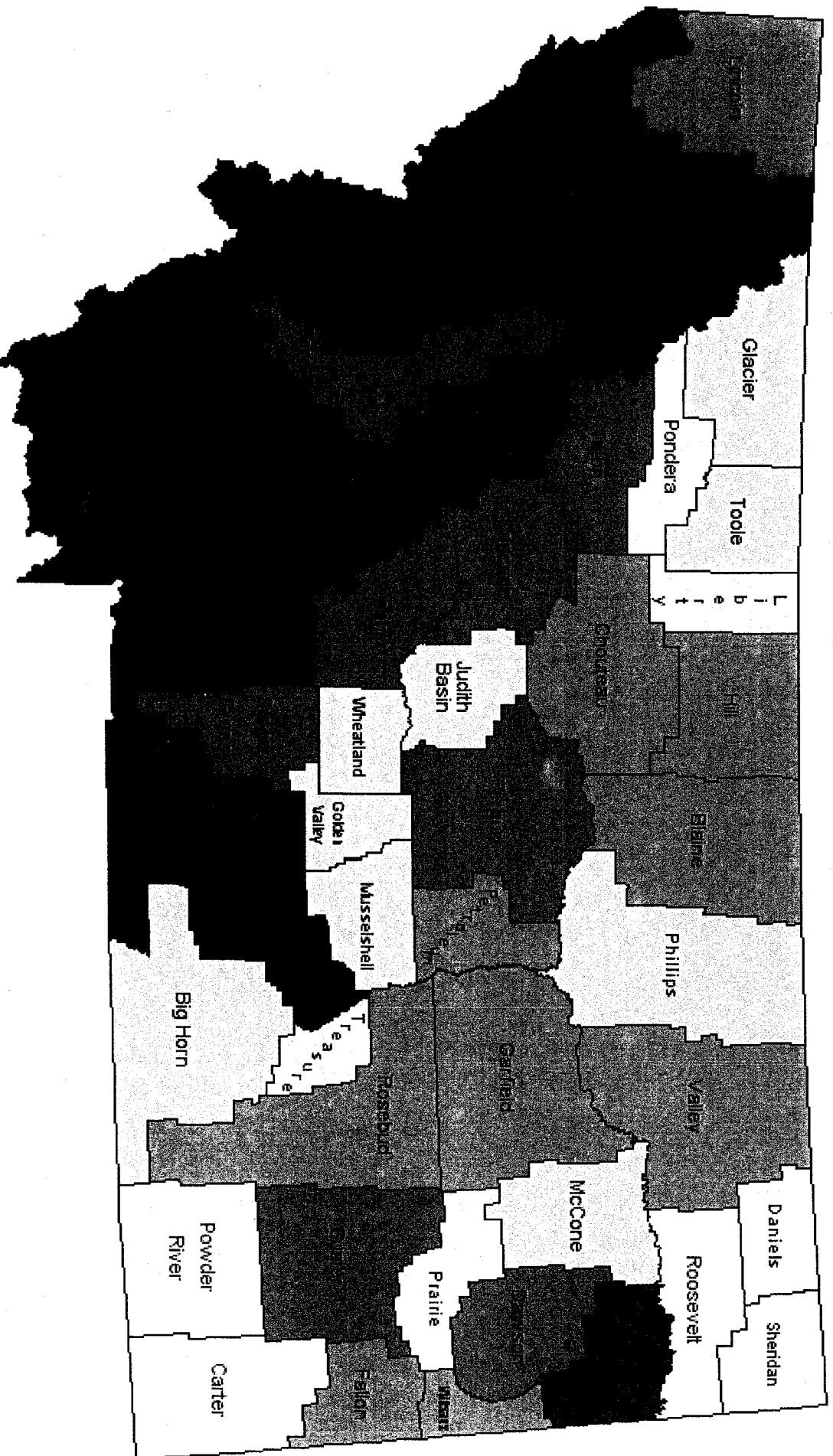
\$10,634 - \$15,274
\$31,502 - \$41,913



\$16,794 - \$20,588
\$42,265 - \$58,145



\$20,663 - \$28,439
\$58,189 - \$112,278



Dollar Change in Market Value

Average Commercial Property

Average Change in Market Value



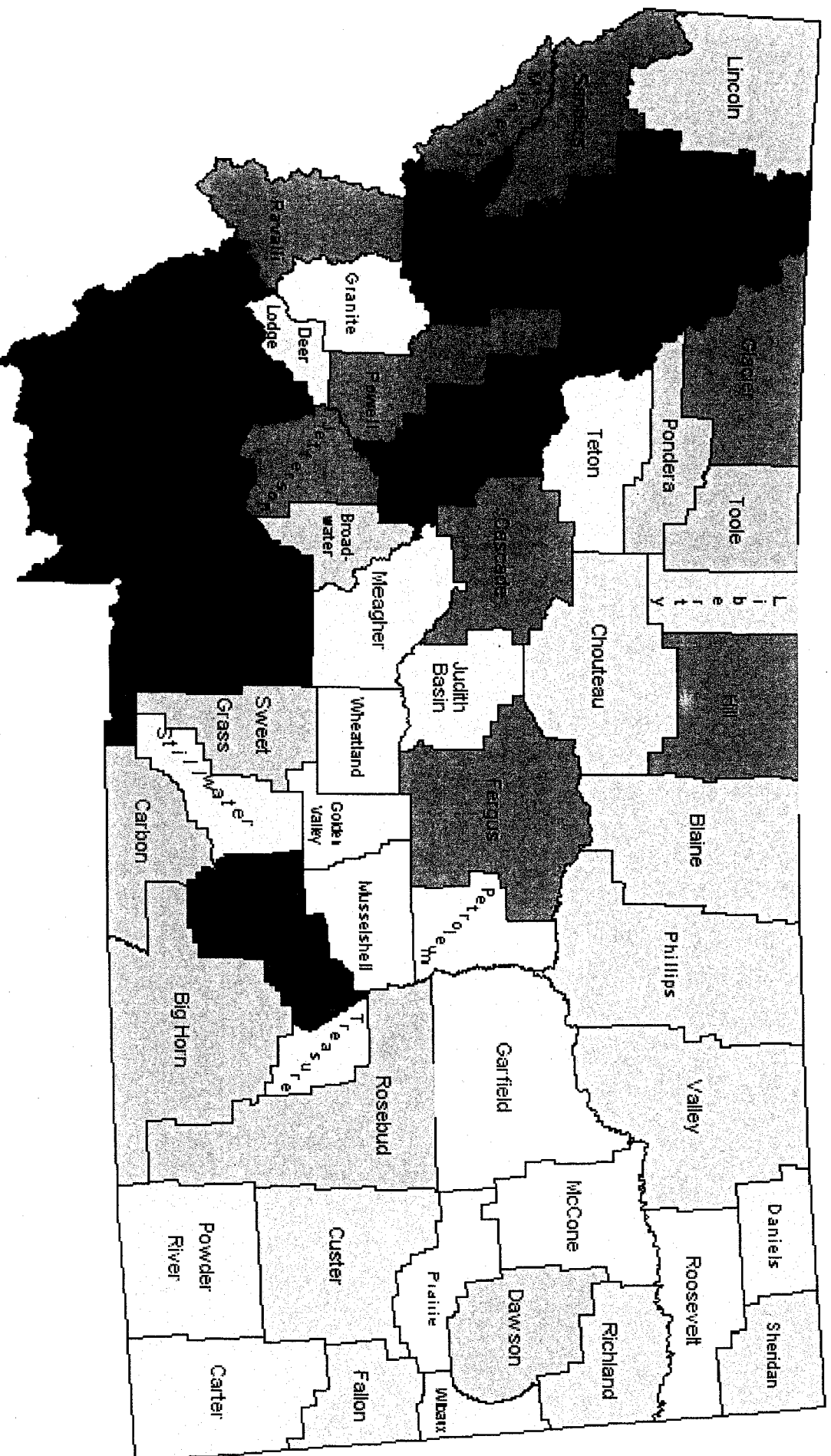
\$2,666 - \$17,842
\$43,366 - \$65,742



\$21,812 - \$27,989
\$66,854 - \$96,088



\$29,411 - \$42,631
\$98,598 - \$221,305





Dan Bucks
Director

Montana Department of Revenue



Brian Schweitzer
Governor

January 29, 2009

Montana Taxpayer:

As an owner or manager of commercial property, you are aware of the impact that economic factors have on property values. We need your help to determine this economic impact. The local Department of Revenue office is gathering income and expense data that will be used to assist us in determining fair and equitable values for commercial properties. We ask that you complete the enclosed form and return it to the Department of Revenue Office within thirty days. For your convenience, a pre-paid addressed envelope has been included for your use.

We are interested only in the rental income and operating expenses of the property. We do not want the income associated with any business enterprise that may occupy the building. If the building is owner occupied, please provide only the expenses associated with operating the building.

If additional space is required, or if you wish to submit supplemental information such as leases and/or Schedule E from your income taxes, please attach it to the form. You may be assured the information you supply will be held confidential. The information you provide will be used, in conjunction with information we receive from other taxpayers, to help us value similar properties.

If you have questions regarding the completion of this form, please call the local Department of Revenue Office in the county in which your property is located. The number for the local office is listed on the front of the enclosed form. A complete listing of the addresses and phone numbers for each office can be accessed on the internet by:

- 1) Entering www.mt.gov/revenue
- 2) Then, with your cursor on "ABOUT THE AGENCY", click on "Local Office Locations" from the menu selections.

A list of frequently asked questions and answers (FAQs) regarding the requested information can be accessed on the internet by:

- 1) Entering www.mt.gov/revenue
- 2) Then, with your cursor on "FOR INDIVIDUALS", click on "Taxes, Licenses, Fees and Permits" from the menu selections.
- 3) Click on "Property Taxes" from the menu selections.
- 4) Click on "Frequently Asked Questions and Answers – Income and Expense Reporting Form" from the menu selections.

Thank you for your assistance.

Sincerely,

Ross Halvorson, Management Analyst
Property Assessment Division



**MONTANA DEPARTMENT OF REVENUE
INCOME & EXPENSE REPORTING FORM**

<_OwnerName_>
<_OwnerAddress_>

Person filing this form (if different from above)

Return to:
Department of Revenue
PO Box 8018
Helena, MT 59604-8018

Property ID: <_PropertyID_>
Assessment Code: <_AssessmentCode_>

The Montana Department of Revenue requests the following applicable information to help us determine equitable values for assessment purposes. Please send your completed form back in the self-addressed envelope within 30 days. If you have questions, please call the local Department of Revenue Office at <_OfficeTelephoneNo_>. Income and expense data is not a matter of public record and is held strictly confidential in accordance to 15-30-303 MCA. Leases are acceptable documentation.

PROPERTY DATA HOTEL/MOTEL

PROPERTY ADDRESS: <_SitusAddress_>
BUILDING NAME: <_SitusAddrLoc_>
STRUCTURE TYPE: <_PrimaryBuildingType_>

REPORTED INCOME AS OF 12/31/_____

Please round to the nearest dollar

- | | |
|---|----------|
| 1. Total Room Revenue | \$ _____ |
| 2. Other Revenue | \$ _____ |
| Food or Restaurant Rent | \$ _____ |
| Beverage or Lounge Rent | \$ _____ |
| Meeting Room Rent | \$ _____ |
| Office/Retail Rent | \$ _____ |
| Telecommunications | \$ _____ |
| Miscellaneous Income | \$ _____ |
| 3. Total Revenue from All Sources | \$ _____ |
| 4. Departmental Costs and Expenses | \$ _____ |
| Rooms | \$ _____ |
| Cost of Food Sold | \$ _____ |
| Cost of Beverages Sold | \$ _____ |
| Telecommunications | \$ _____ |
| Other Operated Departments | \$ _____ |
| 5. Total Departmental Expenses | \$ _____ |
| 6. Undistributed Operating Expenses | \$ _____ |
| Administrative and General | \$ _____ |
| Franchise Fee | \$ _____ |
| Marketing | \$ _____ |
| Property Operations and Maintenance | \$ _____ |
| Utility Costs | \$ _____ |
| Other Unallocated Operated Departments | \$ _____ |
| Reserve for Replacement | \$ _____ |
| 7. Total Undistributed Operating Expenses | \$ _____ |
| 8. Management Fees and Insurance | \$ _____ |
| Management Fee | \$ _____ |
| Insurance | \$ _____ |
| 9. Total Management Fees and Insurance Expenses | \$ _____ |

Income and Expense Reporting Form (continued)

PROJECT AMENITIES		
Swimming Pool	<input type="checkbox"/>	Sauna/Hot Tub
Tennis Courts	<input type="checkbox"/>	Beauty Shop
Club House	<input type="checkbox"/>	Shops
Exercise Room	<input type="checkbox"/>	Game Room
Covered Parking	<input type="checkbox"/>	Guest Laundry
		Coffee Shop
		Restaurant
		Bar
		Casino

HOTEL/MOTEL DAILY RENTAL RATES		
_____ Total Rooms w/Single Beds	@	\$ _____ Night
_____ Total Rooms w/Double Beds	@	\$ _____ Night
_____ Total Suites	@	\$ _____ Night
_____ Extra Persons	@	\$ _____ Night
_____ Total Rentable Rooms	@	\$ _____ Night
Avg./Daily Number of Rooms Rented	=	_____
Avg./Daily Room Rate/Occupied Room	=	_____

		TERM OF LEASE		ANNUAL BASE RENT \$	ANNUAL INCOME \$	ANNUAL AVERAGE VACANCY %
FLOOR LEVEL	LEASEABLE AREA SF	TYPE OF LEASE	FROM YEAR	TO YEAR		
FROM: TO:						
FROM: TO:						
FROM: TO:						
FROM: TO:						
FROM: TO:						

Expense Definitions

Rooms – Includes salaries, wages, and benefits for front desk personnel, reservations staff, housekeeping and laundry workers, bell staff and concierge personnel. In addition, room department expenses include linen, guest supplies, reservation expenses, and commissions to travel agents.

Food – The cost of food sold, together with salaries, wages, and employee benefits for managers, kitchen personnel, servers, cashiers, and hosts comprise the major portion of expenditures in this category. Other applicable expenses include laundry, linen, china, glassware, silverware, and operating supplies.

Beverage – Includes the cost of alcoholic beverages sold, together with applicable payroll and employee benefits. Costs of music and other entertainment provided in beverage outlets are charged to this department. Other applicable expenses include laundry, linen, china, glassware, silverware, and operating supplies.

Telecommunications – Payments to providers of fax, Internet, and telephone services, but does not include costs for telephone equipment rental. Also included in this category are: salaries and wages, payroll taxes and employee benefits, together with other expenses directly related to this activity. Cost associated with the use of telephones, faxes, and the Internet by hotel employees are allocated to the appropriate department.

Administrative and General – Expenditures for the operation of the general manager's office, the accounting department, human resources, security, data processing, and other similar activities. Examples of expenditures include salaries, wages, payroll taxes and employee benefits, legal and accounting fees, credit card commissions, collection expenses, bad debts, computer expenses, office supplies, postage, etc.

Franchise Fees – all fees paid to franchisers except those for reservation services and/or systems. This includes royalties, marketing assessments, and preferred guest programs.

Marketing – Expenditures to sell and promote the hotel's services and enhance its image to the general public. These include salaries, wages, payroll taxes and employee benefits, media advertising, agency fees, outdoor advertising, trade shows, and community projects.

Property Operation and Maintenance – Payments for salaries, wages, payroll taxes and employee benefits, tools and supplies to maintain the buildings, grounds, furniture and equipment of the hotel. Not included are major capital expenditures.

Utility Costs – Costs for electricity, gas and other fuels, steam, water and sewer.

Other Unallocated Departments – Salaries, wages, employee benefits and other expenses applicable to non-revenue producing operations are charged to this category. Such operations might include, for example, house laundry, print shop, etc.

Management Fees – Fees paid for management services and supervision of the property. This includes both base and incentive fees.

Insurance – Includes premiums paid for insuring buildings and contents, liability, fidelity, and theft coverage. Premiums for workers' compensation insurance are not included in this category.

Reserves for Replacement – A portion of money that is set aside each year to replace items that have a shorter life than the building, i.e. carpet, roofing, heating system, etc.

Signed: _____
Signature of Owner or Preparer

Dated: _____

Print Name and Title

Telephone # with Area Code



**MONTANA DEPARTMENT OF REVENUE
INCOME & EXPENSE REPORTING FORM**

Property ID: <_PropertyID_>
Assessment Code: <_AssessmentCode_>

<_OwnerName_>
<_OwnerAddress_>

Person filing this form (if different from above)

Return to:
Department of Revenue
PO Box 8018
Helena, MT 59604-8018

The Montana Department of Revenue requests the following applicable information to help us determine equitable values for assessment purposes. Please send your completed form back in the self-addressed envelope within 30 days. If you have questions, please call the local Department of Revenue Office at <_OfficeTelephoneNo_>. Income and expense data is not a matter of public record and is held strictly confidential in accordance to 15-30-303 MCA. Leases are acceptable documentation.

**PROPERTY DATA OFFICE / RETAIL / WAREHOUSE/MINI-WAREHOUSE /
APARTMENT**

PROPERTY ADDRESS: <_SitusAddress_>
BUILDING NAME: <_SitusAddrLoc_>
STRUCTURE TYPE: <_PrimaryBuildingType_>

REPORTED INCOME AS OF 12/31/_____

Please round to the nearest dollar

- | | | |
|--|----|-------|
| 1. Apartment Rentals @ 100% Occupancy | \$ | _____ |
| 2. Office Rentals @ 100% Occupancy | \$ | _____ |
| 3. Retail Rentals @ 100% Occupancy | \$ | _____ |
| 4. Industrial/Warehouse/Garage Rentals @ 100% Occupancy | \$ | _____ |
| 5. Room Rentals @ 100% Occupancy | \$ | _____ |
| 6. Other Rentals @ 100% Occupancy | \$ | _____ |
| 7. Parking Rental @ 100% Occupancy | \$ | _____ |
| 8. Total Potential Income (add lines 1 through 7) @ 100% Occupancy | \$ | _____ |
| 9. Loss due to Vacancy & Collection Loss | \$ | _____ |
| 10. Effective Annual Income (line 8 minus line 9) | \$ | _____ |
| 11. Other income and reimbursements | \$ | _____ |
| 12. Amount of rentals subsidized by Government | \$ | _____ |

EXPENSES

- | | | |
|--|----|-------|
| 13. Management (cost of administering the leases) | \$ | _____ |
| 14. Leasing Fees/Commissions/Advertising | \$ | _____ |
| 15. Legal/Accounting | \$ | _____ |
| 16. Heating / Air Conditioning Expense | \$ | _____ |
| 17. Electricity | \$ | _____ |
| 18. Water | \$ | _____ |
| 19. Cable TV | \$ | _____ |
| 20. Other Utilities (Specify _____) | \$ | _____ |
| 21. Payroll associated with property (except management) | \$ | _____ |
| 22. Supplies (janitorial, etc.) | \$ | _____ |
| 23. Maintenance & Repairs (Specify _____) | \$ | _____ |
| 24. Maintenance & Repairs (Specify _____) | \$ | _____ |
| 25. Maintenance & Repairs (Specify _____) | \$ | _____ |
| 26. Elevator Maintenance | \$ | _____ |
| 27. Snow/Trash Removal & Landscape Maintenance | \$ | _____ |
| 28. Other (Specify _____) | \$ | _____ |
| 29. Other (Specify _____) | \$ | _____ |
| 30. Building Insurance | \$ | _____ |
| 31. Reserves for Replacement | \$ | _____ |
| 32. Security | \$ | _____ |
| 33. TOTAL EXPENSES (add lines 13 through 32) | \$ | _____ |
| 34. NET OPERATING INCOME (add lines 10 & 11 minus line 33) | \$ | _____ |

Income & Expense Reporting Form (cont.)

ANNUAL RENTAL DATA (OFFICE, RETAIL, AND WAREHOUSE)											
Floor Level			Square Feet of Leased Area	Term of Lease		Annual Base Rent	Additional Annual Income	Annual Average Income	Utilities Included in Rent (check all that apply)		
				From Year	To Year				Electric	Water	Gas
From:		To:				\$	\$	\$			
From:		To:				\$	\$	\$			
From:		To:				\$	\$	\$			
From:		To:				\$	\$	\$			
From:		To:				\$	\$	\$			
From:		To:				\$	\$	\$			
From:		To:				\$	\$	\$			
From:		To:				\$	\$	\$			
From:		To:				\$	\$	\$			
From:		To:				\$	\$	\$			

MONTHLY RENTAL DATA - APARTMENTS										
Efficiency/Studio Apartments						Garage / Storage Rent	Utilities Included in Rent (check all that apply)			
							Electric	Water	Gas	Cable TV
Furnished		Units @		# of Bathrooms		\$				
Unfurnished		Units @		# of Bathrooms		\$				
Furnished		Units @		# of Bathrooms		\$				
Unfurnished		Units @		# of Bathrooms		\$				
1 Bedroom Units						Garage / Storage Rent	Utilities Included in Rent (check all that apply)			
							Electric	Water	Gas	Cable TV
Furnished		Units @		# of Bathrooms		\$				
Unfurnished		Units @		# of Bathrooms		\$				
Furnished		Units @		# of Bathrooms		\$				
Unfurnished		Units @		# of Bathrooms		\$				
2 Bedroom Units						Garage / Storage Rent	Utilities Included in Rent (check all that apply)			
							Electric	Water	Gas	Cable TV
Furnished		Units @		# of Bathrooms		\$				
Unfurnished		Units @		# of Bathrooms		\$				
Furnished		Units @		# of Bathrooms		\$				
Unfurnished		Units @		# of Bathrooms		\$				
3 Bedroom Units						Garage / Storage Rent	Utilities Included in Rent (check all that apply)			
							Electric	Water	Gas	Cable TV
Furnished		Units @		# of Bathrooms		\$				
Unfurnished		Units @		# of Bathrooms		\$				
Furnished		Units @		# of Bathrooms		\$				
Unfurnished		Units @		# of Bathrooms		\$				
4 Bedroom Units						Garage / Storage Rent	Utilities Included in Rent (check all that apply)			
							Electric	Water	Gas	Cable TV
Furnished		Units @		# of Bathrooms		\$				
Unfurnished		Units @		# of Bathrooms		\$				
Furnished		Units @		# of Bathrooms		\$				
Unfurnished		Units @		# of Bathrooms		\$				

MONTHLY RENTAL DATA - MINI-WAREHOUSES				
Unit Size	# Of Units	Monthly Rent	Project Amenities (check all that apply)	
x		\$	Security	
x		\$	On-site Manager	
x		\$	Electricity	
x		\$	Temperature Controlled Units	
x		\$	Yard Lights (leased)	
x		\$	Yard Lights (owned)	
x		\$	Fencing	
x		\$	Other	

Signed: _____

Signature of Owner or Preparer

Dated: _____

Print Name and Title

Telephone No. With Area Code



**MONTANA DEPARTMENT OF REVENUE
INCOME & EXPENSE REPORTING FORM**

<_OwnerName_>
<_OwnerAddress_>

Person filing this form (if different from above)

Return to:
Department of Revenue
PO Box 8018
Helena, MT 59604-8018

Property ID: <_PropertyID_>
Assessment Code: <_AssessmentCode_>

The Montana Department of Revenue requests the following applicable information to help us determine equitable values for assessment purposes. Please send your completed form back in the self-addressed envelope within 30 days. If you have questions, please call the local Department of Revenue Office at <_OfficeTelephoneNo_>. Income and expense data is not a matter of public record and is held strictly confidential in accordance to 15-30-303 MCA. Leases are acceptable documentation.

PROPERTY DATA—MOBILE HOME PARKS & RECREATIONAL VEHICLE PARKS

PROPERTY ADDRESS: <_SitusAddress_>
PARK NAME: <_ParkName_>
STRUCTURE TYPE: <_PrimaryBuildingType_>
NO. OF SPACES: <_NumberOfSpaces_>

REPORTED INCOME AS OF 12/31/_____

Please round to the nearest dollar

1. Mobile Home Spaces @ 100 % Occupancy.....\$ _____
2. RV Spaces @ 100% Occupancy\$ _____
3. Tent Sites @ 100% Occupancy\$ _____
4. Cabins @ 100% Occupancy\$ _____
5. Storage Rentals @ 100% Occupancy.....\$ _____
6. Boat Storage Rentals @ 100% Occupancy.....\$ _____
7. Other Rentals @ 100% Occupancy\$ _____
8. Total Potential Income (add lines 1 through 7) @ 100% Occupancy.....\$ _____
9. Loss Due to Vacancy & Collection Loss.....\$ _____
10. Effective Annual Income (line 8 minus line 9).....\$ _____
11. Other Income and Reimbursements\$ _____

EXPENSES

12. Management (cost of administering the leases).....\$ _____
13. Leasing Fees/Commissions/Advertising.....\$ _____
14. Legal/Accounting.....\$ _____
15. Heat/Air Conditioning Expense\$ _____
16. Electricity\$ _____
17. Water.....\$ _____
18. Other Utilities (Specify _____).....\$ _____
19. Payroll Associated with Property (except management)\$ _____
20. Supplies (janitorial, etc.).....\$ _____
21. Maintenance & Repairs (Specify _____).....\$ _____
22. Maintenance & Repairs (Specify _____).....\$ _____
23. Maintenance & Repairs (Specify _____).....\$ _____
24. Snow/Trash Removal & Landscape Maintenance.....\$ _____
25. Other (Specify _____).....\$ _____
26. Other (Specify _____).....\$ _____
27. Building Insurance.....\$ _____
28. Reserves for Replacement.....\$ _____
29. Security.....\$ _____
30. TOTAL EXPENSES (Add lines 12 through 29).....\$ _____
31. NET OPERATING INCOME (Add lines 10 & 11 minus line 30).....\$ _____

Income and Expense Reporting Form (continued on next page)

PROJECT AMENITIES					
Swimming Pool <input type="checkbox"/>	Shower Facilities <input type="checkbox"/>	Convenience Store <input type="checkbox"/>			
Tennis Courts <input type="checkbox"/>	Storage <input type="checkbox"/>	RV Waste Disposal <input type="checkbox"/>			
Club House <input type="checkbox"/>	Game Room <input type="checkbox"/>	Night Lights <input type="checkbox"/>			
Exercise Room <input type="checkbox"/>	On-site Office <input type="checkbox"/>	Heated Units <input type="checkbox"/>			
Sauna/Hot Tub <input type="checkbox"/>	Guest Laundry <input type="checkbox"/>				

TOTAL SITES AVAILABLE FOR RENT					
_____ Mobile	_____ Travel Trailer	_____ Tent	_____ Cabin	_____ Boat Storage	
Normal Operating Period: _____ Year Around _____ Months					

MONTHLY RENT SCHEDULE					
_____ Mobile Home Spaces	@	\$ _____	_____ RV Spaces	@	\$ _____
_____ Mobile Home Spaces	@	\$ _____	_____ RV Spaces	@	\$ _____
_____ Mobile Home Spaces	@	\$ _____	_____ RV Spaces	@	\$ _____
_____ Tent Sites	@	\$ _____	_____ Cabins	@	\$ _____
_____ Boat Storage	@	\$ _____			

Signed: _____ <div style="text-align: center; font-size: small;">Signature of Owner or Preparer</div>	Dated: _____
_____ Print Name and Title	_____ Telephone # with Area Code